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NISKAYUNA, N				(Depositor's name)			
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APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/725,724	11/21/2003	<u></u>	Joseph John Shiar	<del></del>	28230-3	1007	
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE	DUE PREV. PAID ISSU	E FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	МО	\$1400	\$300	\$0	\$1700	12/19/2007	
EXAMINER ART UNIT		CLASS-SUBCLASS	s				
WILLIAMS, JOSEPH L 2879			313-506000				
1. Change of correspondence address or indication of "Fee Address" (37  CFR 1.363).  2. For printing on the patent front page, list  (1) the same of up to 3 resistant artery are up 1 Mary 1 out 1 see G						uter Cloomi	
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"Fee Address" indication (or "Fee Address" Indication form regis PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer 2 regis				name of a single firm (having as a member a ad attorney or agent) and the names of up to cred patent attorneys or agents. If no name is a name will be printed.			
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Please check the appropriate assignee category or categories (will not be printed on the patent):							
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Typed or printed name Mary Louise Gioeni					Registration No. 41779		
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